

The Indiana Commission to Combat Drug Abuse



Behavioral Health Division

Comprehensive Community Plan

County: Cass County

LCC Name: Partners for a Drug Free Cass County

LCC Contact: Nikki Malott

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City: Logansport

Phone:

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County Commissioners: Mike Stajduhar, Ruth Baker, Mike Deitrich, and Lisa Parmeter

Address: **Cass County Government Building** Room 200 • 200 Court Park

City: Logansport

Zip Code: 46947

Vision Statement

What is your Local Coordinating Council's vision statement?

Bringing people in the community together to provide the best support and resources in an effort to bring greater public awareness to the problems that exist, in our community, related to the abuse of alcohol and other drugs. Working together to create a safer and healthier community.

Mission Statement

What is your Local Coordinating Council's mission statement?

The mission of the Cass County Local Coordinating Council is to identify, coordinate, and facilitate the use of services and available funds in meeting the county's needs in prevention, treatment, and law enforcement as a result of alcohol and drug abuse in Cass County.

Membership List					
#	Name	Organization	Race	Gender	Category
1	Johnathon Fletcher	Bowen	C	M	Treatment
2	Rick Hollering	Youth Services Alliance	C	M	Prevention
3	Nikki Malott	Project Hope 929 Inc.	C	F	Prevention
4	Ed Schroder	Cass Co. Sheriff's Department	C	M	Law Enforcement
5	John Rogers	Logansport Police Dept.	C	M	Law Enforcement
6	Will Scott	Cass County Juvenile Probation	C	M	Law Enforcement
7	Steven Snyder	Snyder Counseling/ CCADCP	C	M	Treatment
9	Dave Wegner	Cass/ Pulaski Community Corrections	C	M	Law Enforcement
10	Chuck Newton	Kiwanis Club/volunteer	C	M	Volunteer
11	Thomas Keller	Coroner's Office	C	M	Volunteer
12	Jennifer Lombard	IYI	C	F	Volunteer
13	Veronica Osborn	Celebrate Recovery	C	F	Treatment
14	Beverly Maloy	Heart and Soil Farm Inc.	C	F	Prevention
15	Mike Osborn	Celebrate Recovery	C	M	Treatment
16	Carol Smithley	Women at the Well	C	F	Treatment
17	Missy A'Hearn	DMHA	C	F	Treatment/Prevention
18	Amy Lewis	Turning Point	C	F	Treatment
19	Chanel Bilby	ASPIN	C	F	Volunteer
20	Nicole Hiatt-Drang	4C	C	F	Treatment

LCC Meeting Schedule:

Please provide the months the LCC meets throughout the year:
2nd Monday of each month from 12pm-1pm. At Revolution Community Church and via Zoom.

Community Needs Assessment: Results

The first step in developing an effective substance use and misuse reduction plan is to assess your community. A community assessment tells you about your community's readiness to implement prevention, treatment, and justice-related programs to address substance use and misuse. An assessment also provides an overview of the risk and protective factors present in the community, helping your coalition plan more effectively.

Community Profile

County Name
Cass County

County Population

Cass County has a population of nearly 40,000, and a median age is 40. Population estimates in 2021 were showing 22.7% children under 18 in our county, ages 18-44 was 31.9%, and 45 and up was at 45.3%. What makes Cass County -- and its county seat of Logansport -- different from most other rural communities in Indiana is the influx of immigrant populations, primarily Hispanic and Burmese, whose households are often employed by Tyson Foods and other meat processors. In 2021 Cass County's race was recorded as 76% white, 17.6% Hispanic/Latino, and 3.17% other/mix race. Cass County employment options are heavy in manufacturing, social services/health care, and retail. The median household income in 2021 was \$53,813. The poverty rate was at 12.1% and for children under 18 it was at 17.4% in our community. Zip Codes primarily served by our coalition are 46947, 46994, 46932, and 46978.

We serve four school districts in our county; Lewis Cass, Logansport, Caston, and Pioneer.

Schools in the community

Cass has 4 County School Corporations, Logansport Community School Corporation, Lewis Cass School Corporation, and Pioneer Regional School Corporation. Our fourth school corporation is Caston School Corporation which sits right on the Fulton/Cass County line North of Logansport. There are many elementary schools, one sixth grade academy, one standalone junior high school and senior high school, and three jr/sr high schools. Logansport is also known for its Century Career Center (CCC), which is attached to Logansport High School. Each of the county's high schools offer courses through Logansport's CCC. Lewis Cass School Corporation now has a Polytechnic Academic Academy as well. There is also a juvenile correction facility, an adult learning center, and an Ivy Tech Community College in Logansport.

Medical care providers in the community (hospitals, health care centers, medical centers/clinics, etc.)

Logansport Memorial Hospital, Indiana Health Centers, Express Med, Cass County Health Department, WIC, Cass County Health Department
Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.) Four County, Snyder Counseling, Clear Skies Counseling, Comprehensive Counseling, Bowen Center (mobile), Brining Hope counseling, Logansport State Hospital
Service agencies/organizations Area 5, Emmaus Mission, Youth Services Alliance, United Way, Salvation Army, Kiwanis, 4 th Dimension Recovery, Father's House, multiple community churches, CASA, DCS, Cass/Pulaski Community Corrections, Cass County Juvenile Probation Dept., SCAN, several agencies that assist people with disabilities, Logansport State Hospital, Cass County Health Department
Local media outlets that reach the community Cass County Communication Network, Pharos Tribune, WLHM 102.3, WSAL, WHZR 103.7, The Network,
What are the substances that are most problematic in your community? The substances we see as problematic in our community are alcohol, marijuana/synthetic marijuana, methamphetamine, tobacco, and opioids/heroin. We will refer to our targeted substances as ATOD (Alcohol, Tobacco, and Other Drugs) from here on.
List all substance use/misuse services/activities/programs presently taking place in the community: Partners for a Drug Free Cass County, 4 th Dimension Recovery, Celebrate Recovery, Stand Up Cass County, Kiwanis initiatives, United Way initiatives, The Father's House, Salvation Army, Heart and Soil Farm Inc.

Community Risk and Protective Factors

Use the list of risk and protective factors to identify those present in your community. Identify the resources/assets and limitations/gaps that exist in your community related to each. The lists are not all-inclusive and others may apply.

Risk Factors Examples: trauma and toxic stressors; poverty violence; neighborhood characteristics; low neighborhood attachment; community disorganization; community norms and laws favorable toward drug use, firearms, and crime; availability of alcohol and other drugs; weak family relationships; family substance use; peer substance use; mental health problems; families moving frequently from home to home; limited prevention and recovery resources.

Protective Factors Examples: strong family relationships; neighborhood economic viability; low childhood stress; access to health care; access to mental health care; community-based interventions; restricted access to alcohol and other drugs including restrictive laws and excise taxes; safe, supportive, and connected

neighborhoods; meaningful youth engagement opportunities; local policies and practices that support healthy norms and child-youth programs; positive connection to adults.¹

Risk Factors	Resources/Assets	Limitations/Gaps
<p>1. Family: family conflict, parental attitudes toward prosocial behavior, generational family substance abuse. Rewards for prosocial involvement are low.</p>	<p>1. LCC partners work to educate adults on the dangers of making alcohol and other drugs readily available to youth.</p> <p>2. Sheriff and Police department are helpful with enforcing laws as they pertain to alcohol and other drugs in the community.</p> <p>3. LCC uses data collected to prioritize which areas they should focus their efforts.</p>	<p>1. Having more key influential members of our community at meetings to help with prevention and treatment.</p> <p>2. Reaching the “at risk” population to assure proper education as it pertains to drug and alcohol use.</p> <p>3. Adults in family use of drugs makes availability easier for youth.</p>
<p>2. Perceived risk of use and availability of drugs is a problem with youth. As well as low commitment to school and low protection for interactions with prosocial peers.</p>	<p>1. LCC partners to educate youth and families on the risks of substance use.</p> <p>2. LCC works at providing helpful information as it pertains to substance use and treatment.</p> <p>3. LCC partners provide resources for families with evidence base curriculum.</p>	<p>1. Reaching the “at risk” population to assure proper education as it pertains to drug and alcohol use in the family</p> <p>2. Lack of family activities in the community with concentration on healthy living and educating on substance use.</p> <p>3. Family Conflict is reported high in Cass County.</p>
<p>3. Community: Rewards for prosocial</p>	<p>1. LCC provides funds to supplement programming.</p>	<p>1. Fund availability</p>

¹Risk and protective factors extracted from IUPUI Center for Health Policy Community Conditions Favorable for Substance Use, April 2018.

<p>involvement, and limited prevention and recovery resources.</p>	<ol style="list-style-type: none"> 2. LCC looks to partner and add Coalition members in order to maximize its efforts to distribute valuable information/resources. 3. LCC attends community events whenever possible to maintain present and involved in providing information/resources to the community. 	<ol style="list-style-type: none"> 2. Lack of events to attend to share information. 3. Limited treatment and prevention options in the county. 4. Community doesn't understand that SUD is a treatable medical condition and reduce/remove stigma.
<p>Protective Factors</p>	<p>Resources/Assets</p>	<p>Limitations/Gaps</p>
<ol style="list-style-type: none"> 1. Motivated individuals/groups working to provide a safe and supportive options in the community. 	<ol style="list-style-type: none"> 1. LCC partners work with other areas of the community to become more connected and involved. 2. LCC partners work to educate the community on the importance of having a safe, supported connected community. 3. LCC partner shares Developmental Asset messaging throughout the community via social media and other outlets. 	<ol style="list-style-type: none"> 1. Lack of funds 2. Lack of community involvement when opportunities are there to connect and support our community. 3. Lack of pride in the community, in some. Negative influences.
<ol style="list-style-type: none"> 2. Range of opportunities in the community for meaningful youth engagement, positive connections through school corporations. 	<ol style="list-style-type: none"> 1. LCC partner provides, in partnership with the local school corporation, an afterschool program. 2. LCC partners share information on youth engagement opportunities as it becomes available. 	<ol style="list-style-type: none"> 1. Nothing for youth to do, and nowhere for them to go. 2. Lack of involvement when community partners try to do something for youth/families. 3. Lack of funds

	<ol style="list-style-type: none"> Many groups in the community that have the ambition and desire to help with youth engagement, should the opportunity for more outreach arise. 	
<ol style="list-style-type: none"> Adults set rules about substance use and risky behaviors. 	<ol style="list-style-type: none"> LCC partner shares Developmental Asset messaging through the community via social media and other outlets. Messaging surrounding Talk, They Hear You, encouraging parents to talk to their kids about risky behaviors. Promotes and provides resources to youth and families. 	<ol style="list-style-type: none"> Lack of funds for programming/events. Busy schedules and less interactions between youth and families. Lack of healthy active adults to engage with

Making A Community Action Plan

Now that you have completed a community assessment and have identified the risk and protective factors that exist, you can develop a plan of action. The Comprehensive Community Plan (CCP) is a systematic and community-driven gathering, analysis, and reporting of community-level indicators for the purpose of identifying and addressing local substance use problems.

Step 1: Create problem statements, and ensure problems statements are in line with statutory requirements

Step 2: Ensure your problem statements are evidence-informed, then prioritize

Step 3: Brainstorm what can be done about each

Step 4: Prioritize your list, and develop SMART goal statements for each

Step 5: List the steps to achieve each goal

Step 1: Create + Categorize Problem Statements

Create problem statements as they relate to each of the identified risk factors.

Risk Factors	Problem Statement(s)
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<p>1. Family: family conflict, parental attitudes toward prosocial behavior, generational family substance abuse. Rewards for prosocial involvement are low.</p>	<p>1. Cass County continues to have a problem with use, misuse and abuse of ATOD.</p> <p>2. Youth and families have low perception of harm when it comes to ATOD.</p> <p>3. Cass County has had a steady rise with opioid misuse and abuse, which has been known to lead to hospitalization or death.</p>
<p>2. Perceived risk of use and availability of drugs is a problem with youth. As well as low commitment to school and low protection for interactions with prosocial peers.</p>	<p>1. Cass County continues to have a problem with use, misuse and abuse of ATOD.</p> <p>2. Youth and families have low perception of harm when it comes to ATOD.</p> <p>3. Cass County has had a steady rise with opioid misuse and abuse, which has been known to lead to hospitalization or death.</p>
<p>3. Community: Rewards for prosocial involvement, and limited prevention and recovery resources.</p>	<p>1. Cass County continues to have a problem with use, misuse and abuse of ATOD.</p> <p>2. Youth and families have low perception of harm when it comes to ATOD.</p> <p>3. Cass County has had a steady rise with opioid misuse and abuse, which has been known to lead to hospitalization or death.</p>

Step 2: Evidence-Informed Problem Statements

Identify your top three problem statements using local or state data. Ensure that there is a problem statement for each co-equal funding category (e.g., prevention/education; intervention/treatment; and criminal justice services and activities).

Abbreviations: Cass County Alcohol & Drug Court Program (CCADCP), Logansport Police Department (LPD), Cass County Sheriff's Department (CCSD), Bowen Center (BC), Cass County Juvenile Probation Dept (CCJPD), Cass Pulaski Community Corrections (CPCC), Snyder Counseling (SC), Community Health Needs Assessment Report (CHNA) Indiana Youth Institute (IYI), Indiana Youth Survey (INYS), Student Resource Officer (SRO) Most data is from January 1-Dec 31, 2022.

Problem Statements	Data That Establishes Problem	Data Source
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<p>1. Cass County continues to have a problem with use, misuse and abuse of ATOD. Availability to minors is an issue.</p>	<ul style="list-style-type: none"> • 61% of referrals were for alcohol charges, 13% marijuana charges, 9% methamphetamine, 4% narcotic/heroin at SC/CCADCP • 136 out of 375 were referred for controlled substance and alcohol offenses. (CPC 2022) • In 2022 there were 32 removals by DCS, 14 were related to substance abuse (IYI) • When asked to pick 3 substance use problems participants believed; marijuana, alcohol, and prescription drugs were the largest abused substances in Cass County. (211 perception surveys by LCC 2022) • 12.1% of the 500 surveyed feel they are excessive drinkers. 35% of those surveyed reported that substance abuse has negatively affected them. (2022 CHNA) • 43.8% of the 32 removals of children from the home in Cass County by DCS was due to parent drug/alcohol abuse. 56.3% was named another reason (IYI 2022) 	<ul style="list-style-type: none"> • Snyder Counseling • Logansport Police Department • Cass County Sherriff's Department • LCC Community Perception Survey • Bowen Center • Cass Pulaski Community Corrections • Indiana Youth Institute
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	<ul style="list-style-type: none"> • 89 arrests were due to alcohol offenses; 6 of which were minors. (2022 CCSD) 	
<p>2. Youth and families have low perception of harm when it comes to ATOD.</p>	<ul style="list-style-type: none"> • 26.6% know of adults who allow underage drinking. (211 perception surveys LCC 2022) • 48.6% of youth reported no risk, or slight risk when asked if people risk harming themselves when they binge drink. (2022 INYS Cass County (LCSC)) • 50.9% of youth reported no or slight risk when asked potential harm if they smoked one pack of cigarettes per day. (2022 INYS Cass County (LCSC)) • 55.1% of youth reported no or slight risk when asked potential harm of smoking marijuana one or two times per week. (INYS 2022) • 42.1% of youth reported no or slight risk when asked potential harm of using prescription drugs not prescribed to them. (INYS 2022) 	<ul style="list-style-type: none"> • LCC Community Perception Survey • Snyder Counseling • Cass County Juvenile Probation Department • Logansport Police Department • Cass County Sherriff's Department • Bowen Center • Indiana Youth Survey

	<ul style="list-style-type: none"> • 68 vapes were confiscated at a local Jr High in one school year (2021-2022-year SRO) 	
<p>3. Cass County has had a steady rise with opioid misuse and abuse, which has been known to lead to hospitalization or death.</p>	<ul style="list-style-type: none"> • 42.1% of youth reported no or slight risk when asked potential harm of using prescription drugs not prescribed to them. (INYS 2022) • There continues to be a rise in Opioid related deaths, in 2022 there were 18 reported overdose deaths in Cass County due to Opioids or meth. (Cass County Coroner) • 35% of the 500 survey respondents indicate that their lives have been negatively affected by substance abuse. (CHNA 2022) • 3% of the 500 respondents who reported “illicit drug use” in the past month. (CHNA 2022) • Prescription drugs and Heroin were named in the top 5 used substances in a perception survey in 2022. (LCC) • 42.1% of youth reported no or slight risk when asked potential harm of using prescription drugs not 	<ul style="list-style-type: none"> • LCC Community Perception Survey • Cass County Juvenile Probation Dept. • Cass County Coroner • Cass County Sherriff’s Department • Community Health Needs Assessment Report • Indiana Youth Institute County Snapshot data

	<p>prescribed to them. (INYS 2022)</p> <ul style="list-style-type: none"> • 27 opioid/heroin related arrests by CCSD (2022) 	
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Step 3: Brainstorm

Consider the resources/assets and limitations/gaps that were identified for each risk factor, and list what actions can be taken for each identified problem statement.

Problem Statements	What can be done (action)?
<p>1. Cass County continues to have a problem with use, misuse, and abuse of ATOD. Availability to minors is an issue.</p>	<ol style="list-style-type: none"> 1. To increase awareness of risk to both juvenile and adult population by 2% in the next three years as indicated by annual community surveys conducted by the LCC. 2. To have cooperation from each of the local school corporations with LCC members and organizations; to allow implementation for alcohol and drug awareness education. 3. To increase LCC Community Outreach and resource distribution, by participating in local events and partnering with other agencies in the community.
<p>2. Youth and families have low perception of harm when it comes to ATOD</p>	<ol style="list-style-type: none"> 1. Increase family/parent education on marijuana use.

	<ol style="list-style-type: none"> 2. See a decrease in perception of harm questions on both INYS and LCC perception surveys. 3. Increase family/parent education on ATOD use. 4. 4.To increase LCC Community Outreach and resource distribution, by participating in local events and partnering with other agencies in the community.
<p>3.Cass County has had a steady rise with opioid misuse and abuse, which has been known to lead to hospitalization or death.</p>	<ol style="list-style-type: none"> 1. Sustain or add to the number of treatment and prevention services focusing on opioid abuse and misuse. 2. Increase family/parent education on prescription drug safety, through educating on locking meds and RX days that may be available in community. 3. Collect and track data for Cass County as it becomes more available. 4. To increase LCC Community Outreach and resource distribution, by participating in local events and partnering with other agencies in the community.

Step 4: Develop SMART Goal Statements

For each problem statement, prioritize your list of what can be done. Choose your top two actions for each. Then, develop goal statements that demonstrate what change you hope to achieve and by when you hope to achieve it.

Problem Statement #1	
Goal 1	Support programming with a focus on risks of ATOD use/abuse in order to lower the monthly use, as reported on the INYS.
Goal 2	Provide educational presence, distribution of resources, and continue community surveys throughout our community. Participate in at least 2 events per year.
Problem Statement #2	
Goal 1	To increase awareness of risk to both juvenile and adult population in the next three years as indicated by annual community surveys conducted by the LCC and partners.
Goal 2	Provide educational presence, distribution of resources, and continue community surveys throughout our community, by participating in at least 2 events per year. Partner with and support youth and family programs/initiatives that prevent use/misuse of substances.
Problem Statement #3	
Goal 1	Collect and track data for Cass County as it becomes more available. Request data and adjust goals as needed. Work closely with partners on programs/initiatives in the community.
Goal 2	Participate/ be available for school programs/clubs such as S.A.D.D. groups in local high schools and participate in school programming for elementary school. Increase or maintain school participation each year.

Step 5: Plans to Achieve Goals

For each goal, list the steps required to achieve each

Problem Statement #1	Steps
Goal 1 Support programming with a focus on risks of ATOD use and abuse.	<ol style="list-style-type: none"> 1. Supplement funding for organizations to provide programming. 2. Continue communicating/partnering with organizations that provide programming. 3. Explore new ways to provide programming.

<p>Goal 2 Provide educational presence, distribution of resources, and continue community surveys throughout our community. Participate in at least 2 events per year.</p>	<ol style="list-style-type: none"> 1. Supporting/partnering with organizations to provide programming to educate on the risks of alcohol use. 2. Participate in local events to provide resources to the community. 3. Work within schools to educate students on the risk alcohol use has on them.
Problem Statement #2	Steps
<p>Goal 1 To increase awareness of risk to both juvenile and adult population in the next three years as indicated by annual community surveys conducted by the LCC and partners.</p>	<ol style="list-style-type: none"> 1. Support campaigns/frameworks that have concentration on risks associated with ATOD use. 2. Provide funds or supplement funds for prevention programming. 3. Participate in local events and provide resources and information on prevention and treatment.
<p>Goal 2 Provide educational presence, distribution of resources, and continue community surveys throughout our community, by participating in at least 2 events per year. Partner with and support youth and family programs/initiatives that prevent use/misuse of substances.</p>	<ol style="list-style-type: none"> 1. Partner with schools to provide resources. 2. Examine our LCC community survey yearly to update or change requested information to reflect our community's needs. 3. Participate in local events and provide resources and information.
Problem Statement #3	Steps
<p>Goal 1 Collect and track data for Cass County as it becomes more available. Request data and adjust goals as needed.</p>	<ol style="list-style-type: none"> 1. Check with local entities for new or updated data and share data as it is collected.

	<ol style="list-style-type: none"> 2. Keep updated on new and updated data that is provided via the web. 3. Work closely with partners on programs/initiatives in the community.
<p>Goal 2 Participate/ become available for school programs/clubs such as S.A.D.D. groups in local high schools and participate in school programming for elementary school.</p>	<ol style="list-style-type: none"> 1. Actively communicate/partner with schools to bring much needed resources. 2. Support local organizations that are providing programming in schools. 3. Join already existing efforts/organizations in the schools by providing resources for distribution.

IV. Fund Document

The fund document allows the LCC to provide finances available to the coalition at the beginning of the year. The fund document gauges an LCC's fiscal wellness to empower their implementation of growth within their community. The fund document also ensures LCCs meet the statutory requirement of funding programs within the three categories of (1) Prevention/Education, (2) Treatment/Intervention, and (3) Criminal Justice Services and Activities (IC 5-2-11-5).

Funding Profile		
1	Amount deposited into the County DFC Fund from fees collected last year:	\$28,554.35
2	Amount of unused funds from last year that will roll over into this year:	\$15,180.76
3	Total funds available for programs and administrative costs for this year (Line 1 + Line 2):	\$43,735.11
4	Amount of funds granted last year:	\$43,151.43
Additional Funding Sources (if no money is received, please enter \$0.00)		
A	Substance Abuse and Mental Health Services Administration (SAMHSA):	\$0.00
B	Centers for Disease Control and Prevention (CDC):	\$0.00
C	Bureau of Justice Administration (BJA):	\$0.00
D	Office of National Drug Control Policy (ONDCP):	\$0.00
E	Indiana State Department of Health (ISDH):	\$0.00
F	Indiana Department of Education (DOE):	\$0.00
G	Indiana Division of Mental Health and Addiction (DMHA):	\$0.00

H	Indiana Family and Social Services Administration (FSSA):		\$0.00
I	Local entities:		\$0.00
J	Other:		\$0.00
Categorical Funding Allocations			
Prevention/Education: \$10,933.78	Intervention/Treatment: \$10,933.78	Justice Services: \$10,933.78	
Funding allotted to Administrative costs:			
<i>Itemized list of what is being funded</i>			<i>Amount (\$100.00)</i>
Coordinator compensation:			\$7,800
Office supplies/events			\$3,133.77
Funding Allocations by Goal per Problem Statement:			
Problem Statement #1	Problem Statement #2	Problem Statement #3	
Goal 1: \$7,348.76	Goal 1: \$7,348.77	Goal 1: \$8,297.13	
Goal 2: \$7,348.82	Goal 2: \$7,348.82	Goal 2: \$4,500.47	